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| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | -                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | ☐ Chapter 7                   |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | Chapter 13                    | Check if this an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself  |  |   |   |
|----|--|--|---|---|
|    |  | About Debtor 1:                                | About Debtor 2 (Spouse Only in a Joint Case): |   |
| 1. | Your full name   |  |   |   |
|    | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).        | Patricia First name  N.  Middle name           | First name  Middle name                       | _ |
|    | Bring your picture identification to your meeting with the trustee.  | Banks Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      | - |
| 2. | All other names you hav used in the last 8 years   | е  |   |   |
|    | Include your married or maiden names.  |  |   |   |
| 3. | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-0838                                    |   |   |

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Debtor 1 Patricia N. Banks

Case number (if known)

|  |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |
|--|--|--|--|--|--|--|
| 4.   | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs.  Business name(s)  EINs   | ☐ I have not used any business name or EINs.  Business name(s)  EINs   |  |  |  |
| 5.   | Where you live   | 3026 W. Marquette Road<br>Apt. 1   | If Debtor 2 lives at a different address:  |  |  |  |
|  |  | Chicago, IL 60626  Number, Street, City, State & ZIP Code  Cook  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |  |
|  |  | Number, P.O. Box, Street, City, State & ZIP Code   | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |  |
| 6. Why you are choosing<br>this district to file for<br>bankruptcy |  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)                                    | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)  |  |  |  |
|  |  |  |  |  |  |  |

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Document Case number (if known) Debtor 1 Patricia N. Banks

| ar        | t 2: Tell the Court About   | Your | Bankı              | ruptcy Ca  | ase  |             |                      |                         |   |  |
|-----------|---|------|--------------------|------------|--|-------------|----------------------|-------------------------|---|--|
| 7.        | The chapter of the<br>Bankruptcy Code you are   |      |                    |            | orief description of each, see<br>go to the top of page 1 and  |             |                      | . § 342(b) for Individ  | luals Filing for Bankruptcy   |  |
|           | choosing to file under  |      | Chap               | oter 7     |  |             |                      |                         |   |  |
|           |   |      | Chap               | oter 11    |  |             |                      |                         |   |  |
|           |   |      | Chap               | oter 12    |  |             |                      |                         |   |  |
|           |   |      | Cha                | pter 13    |  |             |                      |                         |   |  |
|           | How you will pay the fee  |      | Lwi                | II nov the | a antira faa whan I fila my n  | otition D   |                      | a clark's office in you | ur local court for more details   |  |
| <b>).</b> | How you will pay the fee  |      | abo<br>orde        | ut how yo  | ou may pay. Typically, if you attorney is submitting your p  | are paying  | the fee yourself, yo | ou may pay with casl    | ur local court for more details<br>h, cashier's check, or money<br>th a credit card or check with |  |
|           |   |      |                    |            | I to pay the fee in installments. If you choose this option, sign and attach the <i>Application for Individuals to Pailing Fee in Installments</i> (Official Form 103A). |             |                      |                         |   |  |
|           |   |      |                    |            | at my fee be waived (You muired to, waive your fee, and  |             |                      |                         |   |  |
|           |   |      |                    |            | o your family size and you a<br>cation to Have the Chapter 7   |             |                      |                         | oose this option, you must fill with your petition.   |  |
|           | Have you filed for  |      |                    |            |  |             |                      |                         |   |  |
| <b>,</b>  | Have you filed for<br>bankruptcy within the<br>last 8 years?  |      | No.<br>Yes.        |            |  |             |                      |                         |   |  |
|           | ,   | -    | 163.               |            | Northern District of   |             |                      |                         |   |  |
|           |   |      |                    |            | Illinois Eastern   |             |                      |                         |   |  |
|           |   |      |                    | District   | Division   | When        | 7/18/14              | Case number             | 14-26417  |  |
|           |   |      |                    | District   |  | When        |                      | Case number             |   |  |
|           |   |      |                    | District   |  | When        |                      | Case number             |   |  |
| 10.       | Are any bankruptcy cases pending or being   |      | No                 |            |  |             |                      |                         |   |  |
|           | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? |      | Yes.               |            |  |             |                      |                         |   |  |
|           | annate:   |      |                    | Debtor     |  |             |                      | Relationship to y       | /011  |  |
|           |   |      |                    | District   |  | When        |                      | Case number, if         | ·   |  |
|           |   |      |                    | Debtor     |  |             |                      | Relationship to y       | -   |  |
|           |   |      |                    | District   |  | When        |                      | Case number, if         |   |  |
|           |   |      |                    |            |  | _           |                      | <u> </u>                |   |  |
| 11.       | Do you rent your residence?   |      | No. Go to line 12. |            |  |             |                      |                         |   |  |
|           |   |      | Yes.               | Has yo     | our landlord obtained an evice   | tion judgm  | ent against you and  | I do you want to stay   | in your residence?  |  |
|           |   |      |                    |            | No. Go to line 12.   |             |                      |                         |   |  |
|           |   |      |                    |            | Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.   | nt About ai | n Eviction Judgmen   | t Against You (Form     | 101A) and file it with this   |  |
|           |   |      |                    |            |  |             |                      |                         |   |  |

|          |                   | Document | Page 4 of 48 |                       |
|----------|-------------------|----------|--------------|-----------------------|
| Debtor 1 | Patricia N. Banks |          | C            | ase number (if known) |

| Part   | 3: Report About Any Bu  | sine       | sses \             | ou Owr                                | as a Sole Proprieto                                   | r   |
|--|---|------------|--------------------|---------------------------------------|---|---|
| 12.  | Are you a sole proprietor of any full- or part-time business?   |            | No.                | Go to                                 | Part 4.   |   |
|  |   |            | Yes.               | Name                                  | and location of busin                                 | ess   |
| A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. |   |            |                    | Name                                  | e of business, if any                                 |   |
|  | If you have more than one sole proprietorship, use a separate sheet and attach                          |            |                    |                                       |   | & ZIP Code  |
|  | it to this petition.  |            |                    | Chec                                  | k the appropriate box                                 | to describe your business:  |
|  |   |            |                    |                                       | Health Care Busines                                   | ss (as defined in 11 U.S.C. § 101(27A))   |
|  |   |            |                    |                                       | Single Asset Real E                                   | state (as defined in 11 U.S.C. § 101(51B))  |
|  |   |            |                    |                                       | Stockbroker (as def                                   | ined in 11 U.S.C. § 101(53A))   |
|  |   |            |                    |                                       | Commodity Broker                                      | (as defined in 11 U.S.C. § 101(6))  |
|  |   |            |                    |                                       | None of the above                                     |   |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor? | dea<br>ope | adlines<br>eration | s. If you in<br>s, cash-f<br>.C. 1116 | ndicate that you are a low statement, and fed (1)(B). | ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure |
|  | For a definition of small   |            | No.                | I am                                  | not filing under Chapte                               | er 11.  |
|  | business debtor, see 11 U.S.C. § 101(51D).  |            | No.                | I am<br>Code                          |   | , but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|  |   |            | Yes.               | I am                                  | iling under Chapter 11                                | and I am a small business debtor according to the definition in the Bankruptcy Code.  |
| Part   | Report if You Own or  | Hav        | e Any              | Hazarde                               | ous Property or Any I                                 | Property That Needs Immediate Attention   |
| 14.  | Do you own or have any property that poses or is alleged to pose a threat                               | ■<br>No    |                    |                                       |   |   |
|  | of imminent and identifiable hazard to public health or safety?   | ☐<br>Ye    | S.                 | What is                               | the hazard?   |   |
|  | Or do you own any property that needs immediate attention?  |            |                    |                                       | diate attention is why is it needed?                  |   |
| For example, do you own perishable goods, or livestock that must be fed or a building that needs urgent repairs?                                 |   |            |                    | Where i                               | s the property?                                       | lumber Street City State 9 7ip Code   |
|  |   |            |                    |                                       | r   | lumber, Street, City, State & Zip Code  |

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Debtor 1

Patricia N. Banks

Case number (if known)

15. Tell the court whether

Part 5:

you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes Disability. 

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

I have a mental illness or a mental Incapacity. deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case 16-06904 Desc Main Document Page 6 of 48 Case number (if known) Debtor 1 Patricia N. Banks Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. Chapter 7? No. Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative П after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? Yes. property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? How many Creditors do 1,000-5,000 **25,001-50,000** 1-49 you estimate that you 50,001-100,000 5001-10,000 50-99 owe? 10,001-25,000 ■ More than 100,000 100-199 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 be worth? \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion \$100,001 - \$500,000 \$100,000,001 - \$500 million More than \$50 billion \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million \$500,000,001 - \$1 billion П \$0 - \$50,000 estimate your liabilities \$1,000,000,001 - \$10 billion \$10,000,001 - \$50 million \$50,001 - \$100,000 to be? \$50,000,001 - \$100 million \$10,000,000,001 - \$50 billion \$100,001 - \$500,000 \$100,000,001 - \$500 million More than \$50 billion \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Patricia N. Banks Signature of Debtor 2 Patricia N. Banks Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on February 29, 2016

MM / DD / YYYY

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Debtor 1 Patricia N. Banks

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Kevin R       | ouse                   | Date          | February 29, 2016      |  |
|-------------------|------------------------|---------------|------------------------|--|
| Signature of      | Attorney for Debtor    |               | MM / DD / YYYY         |  |
| Kevin Rous        | se                     |               |                        |  |
| Ledford, W        | /u & Borges, LLC       |               |                        |  |
| Firm name         |                        |               |                        |  |
| 105 W. Mad        | dison                  |               |                        |  |
| 23rd Floor        |                        |               |                        |  |
| Chicago, II       | L 60602                |               |                        |  |
| Number, Street, 0 | City, State & ZIP Code |               |                        |  |
| Contact phone     | 312-853-0200           | Email address | notice@billbusters.com |  |
| 6284394           |                        |               |                        |  |

|                     |                          | DOCHIN            | -ni Paue 8 01 48 |  |                                    |
|---------------------|--------------------------|-------------------|------------------|--|------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |                  |  |                                    |
| Debtor 1            | Patricia N. Banks        | ;                 |                  |  |                                    |
|                     | First Name               | Middle Name       | Last Name        |  |                                    |
| Debtor 2            |                          |                   |                  |  |                                    |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |  |                                    |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |  |                                    |
| Case number _       |                          |                   |                  |  |                                    |
| (if known)          |                          |                   |                  |  | Check if this is an amended filing |

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |   | Your as            | sets<br>what you own       |
|-----|---|--------------------|----------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)   | •                  | 0.00                       |
|     | 1a. Copy line 55, Total real estate, from Schedule A/B  | \$                 | 0.00                       |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$                 | 8,995.00                   |
|     | 1c. Copy line 63, Total of all property on Schedule A/B   | \$                 | 8,995.00                   |
| Par | t 2: Summarize Your Liabilities   |                    |                            |
|     |   | Your lia<br>Amount | <b>bilities</b><br>you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D                  | \$                 | 3,252.00                   |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | \$                 | 0.00                       |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$                 | 6,164.00                   |
|     | Your total liabilities  | \$                 | 9,416.00                   |
| Par | t 3: Summarize Your Income and Expenses   |                    |                            |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$                 | 1,469.00                   |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$                 | 1,269.00                   |
| Par | t 4: Answer These Questions for Administrative and Statistical Records  |                    |                            |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                                      | ur other sch       | hedules.                   |
| 7.  | ■ Yes What kind of debt do you have?  |                    |                            |
|     | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | a personal,        | family, or                 |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Patricia N. Banks

the court with your other schedules.

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,862.93

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Tot | tal claim |
|--|-----|-----------|
| From Part 4 on Schedule E/F, copy the following:   |     |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$  | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$  | 0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$  | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$  | 2,126.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$  | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$ | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$  | 2,126.00  |

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|--|---|---|--|--|
| Fill in this information to identify   |   |   |  |  |
| Debtor 1 Patricia N. B   | anks  |   |  |  |
| First Name   | Middle Name   | Last Name   |  |  |
| Debtor 2 (Spouse, if filing) First Name  | Middle Name   | Last Name   |  |  |
| United States Bankruptcy Court for   | the: NORTHERN DISTRICT OF ILLI  | NOIS  |  |  |
| Case number  |   | _   |  | Check if this is an amended filing               |
| Official Form 106A/B   | 3   |   |  |  |
| Schedule A/B: Pr   | -   |   |  | 12/15  |
| In each category, separately list and de it fits best. Be as complete and accura more space is needed, attach a separate | escribe items. List an asset only once. If an<br>te as possible. If two married people are fi<br>te sheet to this form. On the top of any add | ling together, both are equally re<br>litional pages, write your name a | sponsible for supplying                              | e category where you thin                        |
| -  | illding, Land, or Other Real Estate You Ow  |   |  |  |
| 1. Do you own or nave any legal or equ   | uitable interest in any residence, building, l  | and, or similar property?   |  |  |
| No. Go to Part 2.  |   |   |  |  |
| Yes. Where is the property?  |   |   |  |  |
| Part 2: Describe Your Vehicles   |   |   |  |  |
|  | or equitable interest in any vehicles, vehicle, also report it on Schedule G: Eport utility vehicles, motorcycles                             |   |  | enicles you own that                             |
| 3.1 Make: Cherolet   | Who has an interest in th   | e property? Check one   | Do not deduct secured cl<br>the amount of any secure | aims or exemptions. Put ed claims on Schedule D: |
| Model: Monte Carlo-V6  | Debtor 1 only   |   | •  | ms Secured by Property.                          |
| Year: 2003   | ☐ Debtor 2 only  175,000 ☐ Debtor 1 and Debtor 2  |   | Current value of the entire property?                | Current value of the portion you own?            |
| Approximate mileage: Other information:  | Debtor 1 and Debtor 2  At least one of the debtor 2   | ,   | entire property?                                     | portion you own?                                 |
| Value per NADA Guide -   |   |   | 40 500 00  | 40 500 00  |
| retail   | Check if this is comr   | nunity property   | \$3,500.00   | \$3,500.00                                       |
|  | nes, ATVs and other recreational veh<br>, personal watercraft, fishing vessels, s   |   |  |  |
|  | rtion you own for all of your entries f<br>Part 2. Write that number here   |   |  | \$3,500.00                                       |

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

|    |              |  | Case 16  | 6-06904        | Doc 1                                  | Filed 02/29/16<br>Document                    | Entered 02/29/16 16:5<br>Page 11 of 48   | 58:36 Desc Main                                    |
|----|--------------|--|--|----------------|--|---|--|--|
|    | ebto         | r 1  | Patricia N   | . Banks        |  | Boodinent                                     | Case number                              | (if known)   |
| 6. |              | ample<br>No                                | old goods and see: Major appl                        | iances, furni  |  | china, kitchenware                            |  |  |
|    |              |  |  | Bed            |  |   |  | \$75.0   |
| 7. |              | No   | s: Television:                                       | cell phones, o | cameras, med                           | o, stereo, and digital equedia players, games |  | ers; music collections; electronic devices \$100.0 |
| _  |              |  |  |                | ,, , , , , , , , , , , , , , , , , , , | <b>,</b> ,,,                                  |  |  |
| 8. |              | ample<br>No                                |  | ctions, mem    | paintings, pr<br>orabilia, colle       |   | ooks, pictures, or other art objects; st | stamp, coin, or baseball card collections          |
|    |              |  |  | CD/DV          | D's                                    |   |  | \$50.0   |
|    | ). Fii<br>E. | No<br>Yes.<br>rearm<br>No<br>Yes.<br>othes | musical in:  Describe  s  les: Pistols, ri  Describe | fles, shotgun  | ns, ammunitic                          | on, and related equipments                    | nt                                       | is; canoes and kayaks; carpentry tools;            |
|    |              |  |  | Persor         | nal Used Cl                            | lothing                                       |  | \$300.0  |
| 12 | E            | No   |  |                |  | v, engagement rings, we                       | dding rings, heirloom jewelry, watche    | es, gems, gold, silver                             |
| _  |              |  |  |                |  |   |  |  |
|    | E. □         | No<br>Yes.                                 | m animals les: Dogs, car Describe er personal        |                |  | ou did not already list,                      | including any health aids you did        | not list   |
|    |              | No<br>Yes.                                 | Give specifi   | c information  | 1                                      |   |  |  |

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Patricia N. Banks 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$575.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes..... Cash on Hand \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Institution name: ☐ Yes..... 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them. Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

Official Form 106A/B Schedule A/B: Property page 3

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Issuer name and description.

No

No

☐ Yes......

☐ Yes.....

| Debto              | r 1                    | Patricia N. Banks  | Document                      | Page 13 of 48 <sub>C</sub> | ase number (if known)        |   |
|--------------------|------------------------|--|-------------------------------|----------------------------|------------------------------|---|
| 25. <b>Tr</b>      | usts,                  | equitable or future interests in   | property (other than anythi   | ng listed in line 1), and  | l rights or powers exerc     | isable for your benefit   |
|                    | No                     | Cive apositio information about t  | thom                          |                            |                              |   |
| □<br>20 <b>P</b> ( |                        | Give specific information about t  |                               | ol mananti                 |                              |   |
|                    |                        | <ul> <li>copyrights, trademarks, trade<br/>les: Internet domain names, webs</li> </ul>                               |                               |                            | nts                          |   |
|                    | No                     | Cive analisis information about t  | sh o m                        |                            |                              |   |
| 07.1:              |                        | Give specific information about t  |                               |                            |                              |   |
|                    |                        | es, franchises, and other generalles: Building permits, exclusive lic  |                               | on holdings, liquor licens | ses, professional licenses   |   |
|                    | Yes.                   | Give specific information about t  | hem                           |                            |                              |   |
| Mone               | y or p                 | property owed to you?  |                               |                            |                              | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. <b>T</b> a     | ıx refu                | unds owed to you   |                               |                            |                              |   |
|                    | No                     | . Give specific information about t  | thom including whather you    | olroady filed the returns  | and the tay years            |   |
| -                  | 165                    | . Give specific information about t  | inem, including whether you a | alleady filed the returns  | and the tax years            |   |
|                    |                        |  |                               |                            |                              |   |
|                    |                        |  | 2015 Tax refund               |                            | Federal                      | \$4,900.00  |
|                    | t <b>her a</b><br>xamp | Give specific information  mounts someone owes you les: Unpaid wages, disability insur benefits; unpaid loans you ma |                               | nefits, sick pay, vacatior | n pay, workers' compens      | ation, Social Security  |
| 24                 |                        | ·  |                               |                            |                              |   |
|                    |                        | s in insurance policies<br>les: Health, disability, or life insura   | ance; health savings account  | (HSA); credit, homeowr     | ner's, or renter's insuranc  | 9   |
|                    | Yes.                   | Name the insurance company of Company na   |                               | Beneficiar                 | v-                           | Surrender or refund   |
|                    |                        | Company na   | anie.                         | Beneficial                 | y.                           | value:  |
| If                 | you a                  | erest in property that is due you<br>re the beneficiary of a living trust,<br>ne has died.                           |                               |                            | currently entitled to receiv | re property because   |
|                    | No<br>Ves              | Give specific information  |                               |                            |                              |   |
| ш                  | 163.                   | Give specific information  |                               |                            |                              |   |
|                    | xamp                   | against third parties, whether of les: Accidents, employment dispu   |                               |                            | for payment                  |   |
|                    | No<br>Yes.             | Describe each claim  |                               |                            |                              |   |
| _                  |                        | ontingent and unliquidated clai  | ms of every nature, includi   | ng counterclaims of th     | e debtor and rights to s     | et off claims   |
| ■                  | No                     |  |                               | 5                          |                              |   |
|                    | Yes.                   | Describe each claim  |                               |                            |                              |   |
| 35. <b>A</b> ı     | ny fina                | ancial assets you did not alread   | ly list                       |                            |                              |   |

Schedule A/B: Property

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Official Form 106A/B

| Debto         | or 1                | Case 16-06904  Patricia N. Banks                                | Doc 1            | Filed 02/29/16<br>Document            | Entered 02<br>Page 14 of | 2/29/16 16:58:36<br>48<br>Case number (if known) | Desc Main              |  |
|---------------|---------------------|---|------------------|---------------------------------------|--------------------------|--|------------------------|--|
|               |                     | . Give specific information.                                    |                  |                                       |                          | Case Hamber (# Milestry)                         |                        |  |
|               |                     | he dollar value of all of yo<br>art 4. Write that number h      |                  | ,                                     |                          |  | \$4,920.00             |  |
| Part 5        | Des                 | scribe Any Business-Related                                     | Property You (   | Own or Have an Interest Ir            | n. List any real estate  | e in Part 1.                                     |                        |  |
| 37. <b>Do</b> | you o               | wn or have any legal or equit                                   | able interest in | any business-related pro              | pperty?                  |  |                        |  |
|               | No. C               | Go to Part 6.   |                  |                                       |                          |  |                        |  |
|               | Yes.                | Go to line 38.  |                  |                                       |                          |  |                        |  |
|               |                     |   |                  |                                       |                          |  |                        |  |
| Part 6        |                     | scribe Any Farm- and Comme<br>ou own or have an interest in far |                  |                                       | or Have an Interest      | ln.  |                        |  |
| 46. <b>D</b>  | o you               | own or have any legal or  | equitable in     | nterest in any farm- or               | commercial fishi         | ng-related property?                             |                        |  |
|               | ■ No. Go to Part 7. |   |                  |                                       |                          |  |                        |  |
|               | ☐ Ye                | s. Go to line 47.   |                  |                                       |                          |  |                        |  |
| Part 7        | 7:                  | Describe All Property You C                                     | own or Have ar   | n Interest in That You Did            | Not List Above           |  |                        |  |
|               |                     | have other property of an                                       |                  |                                       |                          |  |                        |  |
|               | zamp<br>No          | iles. Season lickets, country                                   | y club membe     | ersnip                                |                          |  |                        |  |
| _             |                     | . Give specific information                                     |                  |                                       |                          |  |                        |  |
|               |                     | ·   |                  |                                       |                          | Ī  |                        |  |
| 54.           | Add t               | he dollar value of all of yo                                    | ur entries fr    | om Part 7. Write that r               | number here              |  | \$0.00                 |  |
| Part 8        | B:                  | List the Totals of Each Part o                                  | f this Form      |                                       |                          |  |                        |  |
| 55.           | Part 1              | : Total real estate, line 2                                     |                  |                                       |                          |  | \$0.00                 |  |
| 56.           | Part 2              | : Total vehicles, line 5  |                  |                                       | \$3,500.00               |  |                        |  |
| 57.           | Part 3              | : Total personal and hous                                       | sehold items     | s, line 15                            | \$575.00                 |  |                        |  |
|               |                     | : Total financial assets, li                                    |                  |                                       | \$4,920.00               |  |                        |  |
|               |                     | : Total business-related p                                      | •                |                                       | \$0.00                   |  |                        |  |
|               |                     | : Total farm- and fishing-                                      |                  | · · · · · · · · · · · · · · · · · · · | \$0.00                   |  |                        |  |
| 61.           | Part 7              | : Total other property not                                      | iistea, line (   | +                                     | \$0.00                   |  |                        |  |
| 62.           | Total               | personal property. Add lin                                      | es 56 throug     | h 61                                  | \$8,995.00               | Copy personal property to                        | otal <b>\$8,995.00</b> |  |
| 63.           | Total               | of all property on Schedu                                       | le A/B. Add I    | ine 55 + line 62                      |                          |  | \$8,995.00             |  |

Official Form 106A/B Schedule A/B: Property page 5

| Fill in this infor                      |                   |                               |           |  |                                    |
|---|-------------------|-------------------------------|-----------|--|------------------------------------|
| Debtor 1                                | Patricia N. Banks | 1                             |           |  |                                    |
|   | First Name        | Middle Name                   | Last Name |  |                                    |
| Debtor 2                                |                   |                               |           |  |                                    |
| (Spouse if, filing)                     | First Name        | Middle Name                   | Last Name |  |                                    |
| United States Bankruptcy Court for the: |                   | NORTHERN DISTRICT OF ILLINOIS |           |  |                                    |
| Case number                             |                   |                               |           |  |                                    |
| (if known)                              |                   |                               |           |  | Check if this is an amended filing |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Che | ck only one box for each exemption.                             |                                    |
| 2003 Cherolet Monte Carlo-V6<br>175.000 miles  | \$3,500.00                           |     | \$248.00  | 735 ILCS 5/12-1001(c)              |
| Value per NADA Guide - clean retail<br>Line from Schedule A/B: 3.1                     |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Bed Line from Schedule A/B: 6.1  | \$75.00                              |     | \$75.00   | 735 ILCS 5/12-1001(b)              |
|  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Television, DVD player, Cell phone,<br>Stereo  | \$100.00                             |     | \$100.00  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B: 7.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| CD/DVD's Line from Schedule A/B: 8.1   | \$50.00                              | •   | \$50.00   | 735 ILCS 5/12-1001(a)              |
|  |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Personal Used Clothing Line from Schedule A/B: 11.1                                    | \$300.00                             |     | \$300.00  | 735 ILCS 5/12-1001(a)              |
|  |                                      |     | 100% of fair market value, up to                                |                                    |

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Case number (if known)

|      | of description of the property and line on edule A/B that lists this property | Current value of the portion you own | Amo   | ount of the exemption you claim                                 | Specific laws that allow exemption |  |
|------|---|--------------------------------------|---|---|------------------------------------|--|
|      |   | Copy the value from<br>Schedule A/B  | Che   |   |                                    |  |
|      | rrings<br>e from <i>Schedule A/B</i> : <b>12.1</b>                            | \$50.00                              |   | \$50.00   | 735 ILCS 5/12-1001(b)              |  |
| Line | , 110111  |                                      |   | 100% of fair market value, up to any applicable statutory limit |                                    |  |
|      | deral: 2015 Tax refund  | \$4,900.00                           |   | \$3,775.00  | 735 ILCS 5/12-1001(b)              |  |
|      | , <u></u>   |                                      | ☐ 100% of fair market value, up to any applicable statutory limit |   |                                    |  |
|      | you claiming a homestead exemption  |                                      | 5?  | any applicable statutory limit                                  |                                    |  |
|      | biggt to adjustment on 1/01/16 and aver                                       | , 2 veers often that for a           |   | lad an ar after the data of adjustmen                           | mt \                               |  |
|      | bject to adjustment on 4/01/16 and ever                                       | y 3 years after that for c           | ases fi   | led on or after the date of adjustme                            | ent.)                              |  |
|      | •   | ,                                    |   | ŕ   | ,                                  |  |
| (Sul | No  | ,                                    |   | ŕ   | ,                                  |  |

|                 | Creditor's Name  5486 Old Dix Forest Park,  Number, Street, City  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor  At least one of the of  Check if this claim  community debt  | GA 30297  , State & Zip Code  Check one.  or 2 only debtors and another | 175,000 m Value per As of the dat apply.  Continge Unliquid: Disputed Nature of lie An agree car loan)  Statutory Judgmen | niles NADA Guide - cle te you file, the claim is: ent ated den. Check all that apply. ement you made (such a | ean retail : Check all that as mortgage or secunechanic's lien) | ured<br>oney Security Int                              | erest   |                          |
|-----------------|---|---|---|--|---|--|---|--------------------------|
|                 | 5486 Old Dix<br>Forest Park,<br>Number, Street, City<br>Dowes the debt?<br>Debtor 1 only<br>Debtor 2 only<br>Debtor 1 and Debtor 1 and Debtor 2 the control of | GA 30297  , State & Zip Code  Check one.  or 2 only debtors and another | 175,000 m Value per As of the dat apply.  Continge Unliquida Disputed Nature of lie An agree car loan)  Statutory         | niles NADA Guide - cle te you file, the claim is: ent ated den. Check all that apply. ement you made (such a | ean retail Check all that                                       | ured   |   |                          |
|                 | 5486 Old Dix<br>Forest Park, Number, Street, City Debtor 1 only Debtor 2 only Debtor 1 and Debtor   | GA 30297  , State & Zip Code  Check one.                                | 175,000 m Value per As of the dat apply.  Continge Unliquida Disputed Nature of lie An agree car loan)  Statutory         | niles NADA Guide - cle te you file, the claim is: ent ated den. Check all that apply. ement you made (such a | ean retail Check all that                                       | ured   |   |                          |
| <b>.</b>        | 5486 Old Dix<br>Forest Park,<br>Number, Street, City<br>Dowes the debt?   | GA 30297<br>, State & Zip Code  | 175,000 m Value per As of the dat apply.  Continge Unliquida Disputed Nature of lie An agree                              | niles NADA Guide - cle te you file, the claim is: ent ated den. Check all that apply. ement you made (such a | ean retail : Check all that                                     | ıred   |   |                          |
| Who             | 5486 Old Dix<br>Forest Park,<br>Number, Street, City  | GA 30297<br>, State & Zip Code  | 175,000 m Value per As of the dat apply.  Continge Unliquida Disputed Nature of lie An agree                              | niles NADA Guide - cle te you file, the claim is: ent ated den. Check all that apply. ement you made (such a | ean retail : Check all that                                     | ured   |   |                          |
| Who             | Creditor's Name  5486 Old Dix Forest Park,  Number, Street, City  | GA 30297<br>, State & Zip Code  | 175,000 m Value per As of the dat apply.  Continge Unliquida Disputed Nature of lie                                       | niles NADA Guide - cle te you file, the claim is: ent ated d en. Check all that apply.                       | ean retail : Check all that                                     |  |   |                          |
|                 | Creditor's Name  5486 Old Dix Forest Park,  Number, Street, City  | GA 30297<br>, State & Zip Code  | 175,000 m Value per As of the dat apply.  Continge Unliquida  | niles NADA Guide - cle te you file, the claim is: ent ated   | ean retail  |  |   |                          |
|                 | Creditor's Name  5486 Old Dix Forest Park,  | GA 30297  | 175,000 m Value per As of the dat apply.  Continge  | niles NADA Guide - cle te you file, the claim is:  | ean retail  |  |   |                          |
|                 | Creditor's Name  5486 Old Dix   |   | 175,000 m<br>Value per<br>As of the dat<br>apply.   | niles<br>NADA Guide - cle<br>te you file, the claim is:  | ean retail  |  |   |                          |
|                 | Creditor's Name   | ie Highway  | 175,000 m<br>Value per<br>As of the dat   | niles<br>NADA Guide - cle  | ean retail  |  |   |                          |
|                 |   |   | 175,000 m   | niles  |   |  |   |                          |
| Creditor's Name |   |   | エンロロス じわるに  | rolet Monte Carlo  | -Vh   |  |   |                          |
| 2.1             | I American Cr   | edit Accept   |   | property that secures  |   | \$3,252.00   | \$3,500.00  | \$0.00                   |
| each<br>as po   | n claim. If more than ossible, list the claim   | one creditor has a possin alphabetical orde                             | articular claim,<br>er according to   |  | Part 2. As much   | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim      | Unsecured portion If any |
| Part            | List All Se   | cured Claims  |   |  |   | Column A   | Column B  | Column C                 |
|                 | Yes. Fill in a  | III of the informatio   | n below.  |  |   |  |   |                          |
|                 | □ No. Check th  | is box and submit   | this form to t  | he court with your otl   | her schedules. Y  | ou have nothing else                                   | e to report on this forr                          | m.                       |
| . Do            | _   | claims secured by   |   |  |   |  |   |                          |
|                 | ed, copy the Additi   |   |   |  |   |  | plying correct informat<br>pages, write your name |                          |
| <u>Sc</u>       | hedule D:   | Creditors   | Who H   | ave Claims   | Secured   | by Propert   | <u>y</u>  | 12/15                    |
|                 | icial Form 1  |   |   |  |   |  |   |                          |
|                 | Case number(if known)   |   |   |  |   |  |   | ck if this is an         |
| Unit            | ed States Bankru  | ptcy Court for the:   | NORTHE  | :RN DISTRICT OF IL   | LINOIS  |  | -   |                          |
|                 | . 3,  |   |   | ERN DISTRICT OF IL   |   |  |   |                          |
| (Snot           | _   | irst Name   | Middl   | le Name  | Last Name   |  | -   |                          |
| Deb             | stor 2  | Patricia N. Bank<br>First Name  |   | le Name  | Last Name   |  | -   |                          |
| Deb             | F   |   |   |  |   |  |   |                          |
| Deb<br>Deb      | otor 1  |   |   |  |   |  |   |                          |
| Deb<br>Deb      | otor 1  | on to identify you  | ır case:  | Document   | Page 17   | UL 40  |   |                          |

\$3,252.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$3,252.00 Write that number here:

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|  | Cas  | se 16-06904 L  |   | ocument   |  | 8 of 48   | D.56.30 DE  | esc Main  |  |
|--|--|--|---|---|--|---|---|---|--|
| Fill ir                                    | n this inform  | ation to identify your   |   | 0   | T AUC.   | 0 (71 40  |   |   |  |
| Debto                                      | or 1   | Patricia N. Banks  |   |   |  |   |   |   |  |
|  |  | First Name   |   | Middle Name   |  | Last Name   |   |   |  |
| Debto                                      |  | First Name   | Middle Ness   |   | Last Name  |   | _   |   |  |
| (Spous                                     | se if, filing)   | First Name   | Middle Name   | е   | Last Name  |   |   |   |  |
| Unite                                      | d States Ban   | kruptcy Court for the:   | NORTHERN D  | DISTRICT OF I   | LLINOIS  |   | _   |   |  |
| Case<br>(if knov                           | number   |  |   |   |  |   |   | Check if this is an amended filing  |  |
| Offic                                      | cial Form  | 106F/F   |   |   |  |   |   |   |  |
|  |  | /F: Creditors W  | /ho Have I  | Insecure  | d Claims   |   |   | 12/15   |  |
| ny ex<br>Sched<br>D: Cre<br>he Co<br>numbe | ecutory contra<br>ule G: Executo<br>ditors Who Ha<br>ntinuation Pager<br>(if known). | acts or unexpired leases to<br>ory Contracts and Unexping Claims Secured by Proge<br>to this page. If you have | that could result in<br>red Leases (Offici<br>operty. If more sp<br>re no information t | n a claim. Also I<br>al Form 106G). I<br>ace is needed, c<br>to report in a Pa  | list executory c<br>Do not include a<br>copy the Part yo | ontracts on Schedule A<br>any creditors with partia<br>ou need, fill it out, numb | B: Property (Offici<br>ally secured claims<br>er the entries in the | ims. List the other party to<br>al Form 106A/B) and on<br>that are listed in Schedule<br>e boxes on the left. Attach<br>s, write your name and case |  |
| Part                                       |  | of Your PRIORITY Un<br>s have priority unsecured   |   |   |  |   |   |   |  |
|  | _  | . ,  | z ciaiiis agaiist y   | ou:   |  |   |   |   |  |
| _  | No. Go to  | Pall 2.  |   |   |  |   |   |   |  |
| L<br>Part :                                | Yes.   | of Your NONPRIORIT   | V Unsecured C   | laime   |  |   |   |   |  |
|  |  | s have nonpriority unsec   |   |   |  |   |   |   |  |
| т.   | _  | ve nothing to report in this   | _   | _   | ith your other sch                                       | nedules   |   |   |  |
|  | _ No. rou na   | ve nothing to report in this p   | part. Submit tills loi  | iiii to tile court wi   | itir your other sor                                      | iedules.  |   |   |  |
|  | Yes.   |  |   |   |  |   |   |   |  |
| cl   | aim, list the cre  | nonpriority unsecured cla<br>editor separately for each cl<br>particular claim, list the other                 | laim. For each clain  | n listed, identify w  | vhat type of clain                                       | n it is. Do not list claims a   | Iready included in P  |   |  |
| 4.1  | City of C  | hicago - Dep't of Re   | evenue La   | ast 4 digits of ac  | count number   | 4668  |   | \$3,600.00  |  |
|  | PO Box   | Creditor's Name<br>88292<br>, IL 60680   | w   | hen was the del   | bt incurred?   |   |   |   |  |
|  | Number Str   | red the debt? Check one.   | A   | s of the date you   | ı file, the claim  | is: Check all that apply  |   |   |  |
|  | Debto  | or 1 only  |   | ] Contingent  |  |   |   |   |  |
|  | □ Debtor   | 2 only   |   | ] Unliquidated  |  |   |   |   |  |
|  | □ Debtor   | 1 and Debtor 2 only  |   | ] Disputed  |  |   |   |   |  |
|  |  | st one of the debtors and ar   |   | pe of NONPRIO   | RITY unsecure  | d claim:  |   |   |  |
|  | _  | if this claim is for a com   | Г   | Student loans   |  |   |   |   |  |
|  | debt   | n subject to offset?   |   | <ul> <li>Obligations arising out of a separation agreement or divorce that you did not<br/>report as priority claims</li> </ul> |  |   |   |   |  |
|  | ■ No   |  |   | Debts to pens   | sion or profit-sha                                       | ring plans, and other simil   | lar debts   |   |  |
|  | ☐ Yes  |  | S   | Other.  | Parking Ti   | ckets/Fines   |   | _   |  |

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Debtor 1 Patricia N. Banks Case number (if know) 4.2 Comcast Last 4 digits of account number \$438.00 Nonpriority Creditor's Name **One Comcast Center** When was the debt incurred? Philadelphia, PA 19103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Contingent ■ Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts Nο Other. ☐ Yes Cable Specify 4.3 **Dept Of Ed/Nelnet** \$2,126.00 8649 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Opened 10/01/12 Last Active Po Box 82505 1/31/16 When was the debt incurred? Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Unliquidated □ Debtor 2 only □ Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts No Other. ☐ Yes Specify Educational Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Arnold Scott Harris, P.C. Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims 111 W. Jackson Blvd Part 2: Creditors with Nonpriority Unsecured Claims Ste 600 Chicago, IL 60604 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Secretary of State Line 4.1 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims Safety & Financial Part 2: Creditors with Nonpriority Unsecured Claims 2701 S. Dirksen Parkway Springfield, IL 62723 Last 4 digits of account number 4668

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

**Total Claim** 

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| Debtor 1 Patricia N | . Banks                      | Document | Case number (if know) |
|---------------------|------------------------------|----------|-----------------------|
| Co                  | Demostic compart abligations |          |                       |

|                          | 6a. | Domestic support obligations  | 6a. | \$ | 0.00       |
|--------------------------|-----|---|-----|----|------------|
| Total claims from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00       |
|                          | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00       |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00       |
|                          | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00       |
|                          |     |   |     | Т  | otal Claim |
|                          | 6f. | Student loans   | 6f. | \$ | 2,126.00   |
| Total claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00       |
|                          | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00       |
|                          | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 4,038.00   |
|                          | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 6,164.00   |

|                     |  | 17(7(4)))))       | <u> </u>    | +( ) |  |                                    |  |  |  |
|---------------------|--|-------------------|-------------|------|--|------------------------------------|--|--|--|
| Fill in this info   | ill in this information to identify your case: |                   |             |      |  |                                    |  |  |  |
| Debtor 1            | Patricia N. Banks                              | <b>.</b>          |             |      |  |                                    |  |  |  |
|                     | First Name                                     | Middle Name       | Last Name   |      |  |                                    |  |  |  |
| Debtor 2            |  |                   |             |      |  |                                    |  |  |  |
| (Spouse if, filing) | First Name                                     | Middle Name       | Last Name   |      |  |                                    |  |  |  |
| United States Ba    | ankruptcy Court for the:                       | NORTHERN DISTRICT | OF ILLINOIS |      |  |                                    |  |  |  |
| Case number         |  |                   |             |      |  |                                    |  |  |  |
| (if known)          |  |                   |             |      |  | Check if this is an amended filing |  |  |  |

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number | whom you have the c | contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---------------------|-------------------|---|
| 2.1 |           |                              |                     |                   |   |
|     | Name      |                              |                     |                   | _                                       |
|     |           |                              |                     |                   |   |
|     | Number    | Street                       |                     |                   | _                                       |
|     | 01:       |                              | 2: :                | 7100              | _                                       |
|     | City      |                              | State               | ZIP Code          |   |
| 2.2 |           |                              |                     |                   | _                                       |
|     | Name      |                              |                     |                   |   |
|     |           |                              |                     |                   |   |
|     | Number    | Street                       |                     |                   |   |
|     |           |                              |                     |                   |   |
|     | City      |                              | State               | ZIP Code          | _                                       |
| 2.3 |           |                              |                     |                   |   |
|     | Name      |                              |                     |                   | _                                       |
|     |           |                              |                     |                   |   |
|     |           |                              |                     |                   | _                                       |
|     | Number    | Street                       |                     |                   |   |
|     | City      |                              | State               | ZIP Code          | _                                       |
| 0.4 | City      |                              | State               | ZIP Code          |   |
| 2.4 |           |                              |                     |                   | _                                       |
|     | Name      |                              |                     |                   |   |
|     |           |                              |                     |                   |   |
|     | Number    | Street                       |                     |                   | _                                       |
|     |           |                              |                     |                   |   |
|     | City      |                              | State               | ZIP Code          | _                                       |
| 2.5 |           |                              |                     |                   |   |
|     | Name      |                              |                     |                   | _                                       |
|     |           |                              |                     |                   |   |
|     | Ni        | 04                           |                     |                   | _                                       |
|     | Number    | Street                       |                     |                   |   |
|     | City      |                              | State               | ZIP Code          | _                                       |
|     | City      |                              | State               | ZIF Code          |   |

|                           |   | Docume   | nt Page 22 c                   | of 48                       |  |
|---------------------------|---|--|--------------------------------|-----------------------------|--|
| Fill in this              | information to identify your  | case:  |                                |                             |  |
| Debtor 1                  | Patricia N. Banks   |  |                                |                             |  |
| Deptor 1                  | First Name  | Middle Name  | Last Name                      |                             |  |
| Debtor 2                  |   |  |                                |                             |  |
| (Spouse if, fili          | ng) First Name  | Middle Name  | Last Name                      |                             |  |
| United Sta                | ites Bankruptcy Court for the:  | NORTHERN DISTRICT                                    | OF ILLINOIS                    |                             |  |
|                           |   |  |                                |                             |  |
| Case num                  | ber   |  |                                |                             | 01 1 1/4 11 1  |
| (II KIIOWII)              |   |  |                                |                             | Check if this is an amended filing   |
|                           |   |  |                                |                             | amended ming   |
| Officia                   | l Form 106H   |  |                                |                             |  |
|                           |   | 1.4  |                                |                             |  |
| Sched                     | lule H: Your Cod  | ebtors   |                                |                             | 12/15  |
|                           | are people or entities who a  |  |                                |                             |  |
| ill it out, a<br>our name | and number the entries in the<br>e and case number (if known)   | boxes on the left. Attach<br>. Answer every question | n the Additional Page t        | to this page. On the top of | led, copy the Additional Page,<br>any Additional Pages, write                                    |
| 1. Do                     | you have any codebtors? (If   | you are filing a joint case,                         | do not list either spouse      | e as a codebtor.            |  |
| ■ N                       | lo  |  |                                |                             |  |
| Ye                        |   |  |                                |                             |  |
| · ·                       |   |  |                                |                             |  |
|                           | hin the last 8 years, have you  |  |                                |                             | ates and territories include   |
| Arizon                    | na, California, Idaho, Louisiana,   | nevada, new Mexico, Pu                               | eno Rico, Texas, wash          | lington, and wisconsin.)    |  |
| ■ N                       | lo. Go to line 3.   |  |                                |                             |  |
| _                         | es. Did your spouse, former spo   | ouse, or legal equivalent liv                        | ve with you at the time?       |                             |  |
| · ·                       | 50. 2.a your opouss, 10o. op  | ouoo, o. logal oquitaloni ii                         | io iiiii. you at iiio iiiiio i |                             |  |
| in line<br>Form           | lumn 1, list all of your codebte 2 again as a codebtor only i<br>106D), Schedule E/F (Official<br>t Column 2. | f that person is a guaran                            | tor or cosigner. Make          | sure you have listed the o  | ith you. List the person showr<br>reditor on Schedule D (Officia<br>nedule E/F, or Schedule G to |
|                           | Column 1: Your codebtor Name, Number, Street, City, State and Zl  | P Code   |                                |                             | or to whom you owe the debt  |
|                           | , rianizor, caroot, ony, ciato and zi   |  |                                | Check all schedules th      | αι αρριγ.  |
| 3.1                       |   |  |                                | _ Schedule D, line          |  |
|                           | Name  |  |                                | ☐ Schedule E/F, line        | ·  |
|                           |   |  |                                | ☐ Schedule G, line _        |  |
| -                         | Number Street   |  |                                | _                           |  |
|                           | City  | State  | ZIP Code                       |                             |  |
|                           |   |  |                                |                             |  |
| 3.2                       |   |  |                                | _ Schedule D, line          |  |
|                           | Name  |  |                                | □ Schedule E/F, line        |  |
|                           |   |  |                                | Schedule G, line            |  |
| -                         | Number Street   |  |                                | _                           |  |
|                           | City  | State  | ZIP Code                       |                             |  |

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| Del                       | otor 1 Patricia N. E   | Banks   |  |   |
|---------------------------|--|---|--|---|
|                           | otor 2<br>uuse, if filing)   |   |  |   |
| Uni                       | ted States Bankruptcy Court for the  | e: NORTHERN DISTRIC   | CT OF ILLINOIS   |   |
| _                         | se number<br>lown)   |   | -  | Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:   |
|                           | fficial Form 106I  |   |  | MM / DD/ YYYY   |
| S                         | chedule I: Your Inc  | ome   |  | 12/1  |
| sup<br>spo<br>atta        | plying correct information. If you<br>use. If you are separated and you  | are married and not fili<br>or spouse is not filing w   | ing jointly, and your spouse is<br>ith you, do not include inform  | r 1 and Debtor 2), both are equally responsible for living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question |
| sup<br>spo<br>atta        | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.   | are married and not fili<br>or spouse is not filing w   | ing jointly, and your spouse is<br>rith you, do not include inform<br>ional pages, write your name a                                 | living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question   |
| sup<br>spo<br>atta<br>Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment information.   | are married and not fili<br>or spouse is not filing w   | ing jointly, and your spouse is<br>rith you, do not include inform<br>ional pages, write your name a                                 | living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question Debtor 2 or non-filing spouse                       |
| sup<br>spo<br>atta<br>Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  It 1: Describe Employment information.  If you have more than one job, attach a separate page with   | are married and not fili<br>or spouse is not filing w   | ing jointly, and your spouse is<br>rith you, do not include inform<br>ional pages, write your name a                                 | living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question   |
| sup<br>spo<br>atta<br>Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment information.  If you have more than one job,   | are married and not fili<br>ur spouse is not filing w<br>On the top of any addit                                    | ing jointly, and your spouse is ith you, do not include inform ional pages, write your name and Debtor 1  Employed                   | living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question Debtor 2 or non-filing spouse  Employed             |
| sup<br>spo<br>atta<br>Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  It 1: Describe Employment information.  If you have more than one job, attach a separate page with information about additional  | are married and not fili<br>ur spouse is not filing w<br>On the top of any addit                                    | ing jointly, and your spouse is inth you, do not include inform ional pages, write your name a Debtor 1  Employed  Not employed      | living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed            |
| sup<br>spo<br>atta<br>Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The Describe Employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or  | are married and not fili<br>ur spouse is not filing w<br>On the top of any addit<br>Employment status<br>Occupation | ing jointly, and your spouse is inth you, do not include inform ional pages, write your name a Debtor 1  Employed  Not employed  FSW | living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed            |
| sup<br>spo<br>atta<br>Par | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The Describe Employment  Fill in your employment information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student | are married and not filing work on the top of any addit  Employment status  Occupation  Employer's name             | Debtor 1  Employed  Not employed  FSW  Aramark  1101 Market Street Philadelphia, PA 19107  | living with you, include information about your ation about your spouse. If more space is needed, and case number (if known). Answer every question  Debtor 2 or non-filing spouse  Employed            |

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

|    |     |          | non-f | iling spouse |
|----|-----|----------|-------|--------------|
| 2. | \$  | 1,630.00 | \$    | 0.00         |
| 3. | +\$ | 0.00     | +\$   | 0.00         |
| 4. | \$  | 1,630.00 | \$_   | 0.00         |

For Debtor 1 For Debtor 2 or

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| Debt | or 1          | Patricia N. Banks  | _                | Case      | number ( <i>if kn</i>                   | own) |           |                                       |                   |
|------|---------------|--|------------------|-----------|---|------|-----------|---------------------------------------|-------------------|
|      | Con           | y line 4 here  | 4.               | For       | Debtor 1                                |      |           | Debtor 2 or<br>-filing spouse<br>0.00 |                   |
|      | СОР           | y line 4 nere  | 4.               | Ψ_        | 1,630                                   | .00  | Ψ         | 0.00                                  | _                 |
| 5.   | List          | all payroll deductions:  |                  |           |   |      |           |                                       |                   |
|      | 5a.           | Tax, Medicare, and Social Security deductions  | 5a.              | \$_       | 266                                     |      | \$        | 0.00                                  | _                 |
|      | 5b.           | Mandatory contributions for retirement plans   | 5b.              | \$_       |   | .00  | \$        | 0.00                                  | _                 |
|      | 5c.           | Voluntary contributions for retirement plans   | 5c.              | \$_<br>\$ |   | .00  | \$_<br>\$ | 0.00                                  | _                 |
|      | 5d.<br>5e.    | Required repayments of retirement fund loans Insurance   | 5d.<br>5e.       | \$<br>_   |   | .00  | φ         | 0.00<br>0.00                          | _                 |
|      | 5f.           | Domestic support obligations   | 5f.              | \$_       |   | .00  | \$_       | 0.00                                  | _                 |
|      | 5g.           | Union dues   | 5g.              | \$_       |   | .00  | \$_       | 0.00                                  | _                 |
|      | 5h.           | Other deductions. Specify: WI CO   | 5h.⊣             | - \$      |   | .00  | + \$      | 0.00                                  | _                 |
| 6.   | Add           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.               | \$        | 311                                     | .00  | \$        | 0.00                                  | _                 |
| 7.   | Cald          | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.               | \$_       | 1,319                                   | .00  | \$        | 0.00                                  | _                 |
| 8.   | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                            |                  |           |   |      |           |                                       |                   |
|      |               | monthly net income.  | 8a.              | \$        | 150                                     | .00  | \$        | 0.00                                  |                   |
|      | 8b.           | Interest and dividends   | 8b.              | \$        | 0                                       | .00  | \$        | 0.00                                  | _                 |
|      | 8c.           | Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.              | \$        |   | .00  | \$        | 0.00                                  | _                 |
|      | 8d.           | Unemployment compensation  | 8d.              | \$_       |   | .00  | \$        | 0.00                                  | _                 |
|      | 8e.<br>8f.    | Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8e.<br>ce<br>8f. | \$_<br>\$ |   | .00  | \$<br>\$  | 0.00                                  | _                 |
|      | 8g.           | Pension or retirement income   | 8g.              | \$        |   | .00  | \$        | 0.00                                  | <del>-</del><br>- |
|      | 8h.           | Other monthly income. Specify:   | 8h.+             | - \$_     | 0                                       | .00  | + \$      | 0.00                                  | _                 |
| 9.   | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.               | \$        | 150                                     | .00  | \$        | 0.0                                   | 0                 |
| 10.  | Calc          | culate monthly income. Add line 7 + line 9.  | 10. \$           |           | 1,469.00                                | + \$ |           | 0.00 = \$                             | 1,469.00          |
|      | Add           | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | '                |           | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | -    |           |                                       | .,                |
| 11.  | Inclu<br>othe | e all other regular contributions to the expenses that you list in Schedul ade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:                      | ır deper         |           |   |      | •         | Schedule J.<br>11. +\$                | 0.00              |
| 12.  |               | the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Centies  |                  |           |   |      |           | 12. \$                                | 1,469.00          |
|      |               |  |                  |           |   |      |           | Combi                                 |                   |
| 13.  | Do y<br>■     | you expect an increase or decrease within the year after you file this form No. Yes. Explain:  | n?               |           |   |      |           | month                                 | ly income         |

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| Fill      | in this information to identify y  | our case:              |  |   |                                      |                                     |   |
|-----------|--|------------------------|--|---|--------------------------------------|-------------------------------------|---|
| Deb       | otor 1 Patricia N. E   | Banks                  |  |   | Chec                                 | k if this is:                       |   |
|           | otor 2 ouse, if filing)  |                        |  |   |                                      |                                     | wing postpetition chapter the following date:       |
| Unit      | ted States Bankruptcy Court for the  | · NORT                 | HERN DISTRICT OF ILL IN  | OIS   | _                                    | MM / DD / YYYY                      |   |
|           | se number  | . 110111               | THE THE PROPERTY OF THE PROPER |   |                                      | .vv., 22, 1111                      |   |
|           | nown)  |                        |  |   |                                      |                                     |   |
| 0         | fficial Form 106J  |                        |  |   |                                      |                                     |   |
| Be        | chedule J: Your as complete and accurate a prmation. If more space is no mber (if known). Answer eve   | s possibl<br>eeded, at | e. If two married people a<br>tach another sheet to this   | re filing together, k<br>form. On the top c | ooth are equ<br>of any additi        | ally responsible fonal pages, write | 12/15<br>or supplying correct<br>your name and case |
| Par<br>1. | t 1: Describe Your Hous Is this a joint case?  | ehold                  |  |   |                                      |                                     |   |
|           | ■ No. Go to line 2.  ☐ Yes. <b>Does Debtor 2 liv</b>   | e in a ser             | parate household?  |   |                                      |                                     |   |
|           | _ No   |                        | ficial Form 106J-2, <i>Expense</i>   | es for Separate Hou                         | usehold of De                        | btor 2.                             |   |
| 2.        | Do you have dependents?  | ■ No                   | )  |   |                                      |                                     |   |
|           | Do not list Debtor 1 and Debtor 2.   | □<br>Yes.              | Fill out this information for each dependent   | Dependent's relati<br>Debtor 1 or Debto     |                                      | Dependent's age                     | Does dependent live with you?                       |
|           | Do not state the dependents names.   |                        |  |   |                                      |                                     | No Yes No Yes No Yes No No No                       |
| 3.        | Do your expenses include expenses of people other yourself and your depende  | than                   | ■ No<br>] Yes  |   |                                      |                                     | ☐ Yes   |
| Est       | Estimate Your Ongo timate your expenses as of a date after the olicable date.  | our bank               | ruptcy filing date unless y  |   |                                      |                                     |   |
| the       | lude expenses paid for with<br>value of such assistance ar<br>ficial Form 106I.)   |                        |  |   |                                      | Your exp                            | enses   |
| 4.        | The rental or home owners payments and any rent for the  |                        | -  | nclude first mortgag                        | ge<br>4. \$                          |                                     | 300.00  |
|           | If not included in line 4:   |                        |  |   |                                      |                                     |   |
|           | <ul> <li>4a. Real estate taxes</li> <li>4b. Property, homeowner</li> <li>4c. Home maintenance, r</li> <li>4d. Homeowner's associa</li> </ul> | epair, and             | upkeep expenses  |   | 4a. \$<br>4b. \$<br>4c. \$<br>4d. \$ |                                     | 0.00<br>0.00<br>0.00<br>0.00                        |
| 5         | Additional mortgage navm   |                        |  | mo oquity loons                             | 5 \$                                 |                                     | 0.00  |

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| Deb | otor 1 | Patricia N. Banks  | Case num     | ber (if known) |                            |
|-----|--------|--|--------------|----------------|----------------------------|
| 6.  | Utilit | ies:   |              |                |                            |
| ٥.  | 6a.    | Electricity, heat, natural gas   | 6a.          | \$             | 74.00                      |
|     | 6b.    | Water, sewer, garbage collection   | 6b.          | \$             | 0.00                       |
|     | 6c.    | Telephone, cell phone, Internet, satellite, and cable services   | 6c.          | \$             | 90.00                      |
|     | 6d.    | Other. Specify:  | 6d.          | \$             | 0.00                       |
| 7.  | Food   | I and housekeeping supplies  |              | \$             | 300.00                     |
| 8.  |        | Icare and children's education costs   | 8.           | \$             | 0.00                       |
| 9.  |        | ning, laundry, and dry cleaning  | 9.           | ·              | 80.00                      |
| 10. |        | onal care products and services  | 10.          | ·              | 95.00                      |
|     |        | cal and dental expenses  | 11.          | ·              | 0.00                       |
|     |        | sportation. Include gas, maintenance, bus or train fare.   |              | · —            |                            |
|     |        | ot include car payments.   | 12.          | \$             | 250.00                     |
| 13. | Ente   | rtainment, clubs, recreation, newspapers, magazines, and books   | 13.          | \$             | 0.00                       |
| 14. | Char   | itable contributions and religious donations   | 14.          | \$             | 0.00                       |
| 15. | Insur  | rance.   |              | -              |                            |
|     | Do no  | ot include insurance deducted from your pay or included in lines 4 or 20.  |              |                |                            |
|     | 15a.   | Life insurance   | 15a.         | \$             | 0.00                       |
|     | 15b.   | Health insurance   | 15b.         | \$             | 0.00                       |
|     | 15c.   | Vehicle insurance  | 15c.         | \$             | 80.00                      |
|     | 15d.   | Other insurance. Specify:  | 15d.         | \$             | 0.00                       |
| 16. | Taxe   | s. Do not include taxes deducted from your pay or included in lines 4 or 20.   |              |                |                            |
|     | Spec   | •  | 16.          | \$             | 0.00                       |
| 17. |        | Ilment or lease payments:  |              | •              |                            |
|     |        | Car payments for Vehicle 1   | 17a.         | *              | 0.00                       |
|     |        | Car payments for Vehicle 2   | 17b.         | ·              | 0.00                       |
|     |        | Other. Specify:  | 17c.         | ·              | 0.00                       |
|     |        | Other. Specify:  | 17d.         | \$             | 0.00                       |
| 18. |        | payments of alimony, maintenance, and support that you did not report as   | 18.          | ¢              | 0.00                       |
| 10  | dedu   | icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   | 10.          | ·              |                            |
| 19. |        | r payments you make to support others who do not live with you.  | 40           | \$             | 0.00                       |
| 20  | Spec   |  | 19.          | aur Incomo     |                            |
| 20. |        | r real property expenses not included in lines 4 or 5 of this form or on Sche<br>Mortgages on other property   | 20a.         |                | 0.00                       |
|     |        | Real estate taxes  | 20a.<br>20b. |                | 0.00                       |
|     |        | Property, homeowner's, or renter's insurance   | 20b.<br>20c. | ·              | 0.00                       |
|     |        | Maintenance, repair, and upkeep expenses   | 20d.         | ·              |                            |
|     |        | Homeowner's association or condominium dues  | 20u.<br>20e. |                | 0.00                       |
| 04  |        |  |              | ·              | 0.00                       |
| 21. | Otne   | r: Specify:  | 21.          | +\$            | 0.00                       |
| 22. | Calc   | ulate your monthly expenses  |              |                |                            |
|     |        | Add lines 4 through 21.  |              | \$             | 1,269.00                   |
|     | 22b.   | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  |              | \$             | ,                          |
|     | 22c    | Add line 22a and 22b. The result is your monthly expenses.   |              | \$             | 1,269.00                   |
|     | 220.   | Add line 22a and 22b. The result is your monthly expenses.   |              | Ψ              | 1,209.00                   |
| 23. |        | ulate your monthly net income.   |              |                |                            |
|     | 23a.   | Copy line 12 (your combined monthly income) from Schedule I.   | 23a.         | \$             | 1,469.00                   |
|     | 23b.   | Copy your monthly expenses from line 22c above.  | 23b.         | -\$            | 1,269.00                   |
|     |        |  |              |                |                            |
|     | 23c.   | Subtract your monthly expenses from your monthly income.   | 220          | ¢              | 200.00                     |
|     |        | The result is your <i>monthly net income</i> .   | 23c.         | \$             | 200.00                     |
| 24  | Do v   | ou avnoct an increase or decrease in your evnences within the year offer yo  | u filo 4hi   | s form?        |                            |
| 24. |        | ou expect an increase or decrease in your expenses within the year after your expenses within the year after your nample, do you expect to finish paying for your car loan within the year or do you expect your n |              |                | e or decrease because of a |
|     |        | cation to the terms of your mortgage?  | gago po      | .,             |                            |
|     |        | No.  |              |                |                            |
|     |        |  |              |                |                            |
|     | $\Box$ | Yes.   Explain here:   |              |                |                            |

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| Fill in this info      | emotion to identify your                            |                          |                             |                       |           |  |
|------------------------|---|--------------------------|-----------------------------|-----------------------|-----------|--|
|                        | rmation to identify your                            | case.                    |                             |                       |           |  |
| Debtor 1               | Patricia N. Banks First Name                        | Middle Name              | Last Name                   |                       |           |  |
| Debtor 2               | . not reame   | imadio raino             | <u> </u>                    |                       |           |  |
| (Spouse if, filing)    | First Name  | Middle Name              | Last Name                   |                       |           |  |
| United States B        | ankruptcy Court for the:                            | NORTHERN DISTRICT        | OF ILLINOIS                 |                       |           |  |
| Case number (if known) |   |                          |                             |                       | _         | Check if this is an amended filing                       |
| Official For           | m 106Dec  |                          |                             |                       |           |  |
| <b>Declara</b> t       | tion About a  | n Individual             | <b>Debtor's Sch</b>         | hedules               |           | 12/15  |
| years, or both. 1      | in Below  |                          | ruptcy case can result in   | i iiies up to \$250,0 | oo, or mi | insomment for up to 20                                   |
| Did you pa             | ay or agree to pay some                             | one who is NOT an attor  | ney to help you fill out ba | ankruptcy forms?      |           |  |
| ■ No                   |   |                          |                             |                       |           |  |
| ☐ Yes.                 | Name of person                                      |                          |                             |                       |           | etition Preparer's Notice,<br>nature (Official Form 119) |
| that they ar           | alty of perjury, I declare to the true and correct. | that I have read the sum | mary and schedules filed    | d with this declarati | on and    |  |
| Patric                 | ia N. Banks<br>ure of Debtor 1                      |                          | Signature of I              | Debtor 2              |           |  |

Date

Date February 29, 2016

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|          |   | mation to identify you                      |  |   |  |   |
|----------|---|---|--|---|--|---|
| De       | ebtor 1                                       | Patricia N. Bank                            | Middle Name                                | Last Name   |  |   |
| 1        | ebtor 2                                       |   |  |   |  |   |
| (Sp      | oouse if, filing)                             | First Name                                  | Middle Name                                | Last Name   |  |   |
| Ur       | nited States Ba                               | nkruptcy Court for the                      | NORTHERN DISTRICT                          | OF ILLINOIS   |  |   |
| 1        | ase number _                                  |   |  |   |  | Check if this is an amended filing                    |
| St       |   | of Financial                                |  | duals Filing for E  |  | 12/1:   |
| info     | ormation. If member (if know                  |   | , attach a separate sheet t                | e are filing together, both ar<br>o this form. On the top of a                                |  |   |
| Pa<br>1. |   | Details About Your M r current marital stat | arital Status and Where Yous?              | ou Lived Before   |  |   |
| ٠.       | wriat is you                                  | i current mantai stat                       | us:  |   |  |   |
|          | <ul><li>■ Married</li><li>■ Not mar</li></ul> |   |  |   |  |   |
| 2.       | During the la                                 | ast 3 years, have you                       | lived anywhere other than                  | n where you live now?   |  |   |
|          | □ No  |   |  |   |  |   |
|          | _   | st all of the places you                    | lived in the last 3 years. Do              | not include where you live no   | ow.  |   |
|          | Debtor 1 Pr                                   | rior Address:                               | Dates Debtor lived there                   | 1 Debtor 2 Prior A  | ddress:                                    | Dates Debtor 2<br>lived there                         |
|          | 6356 S. Ki<br>Chicago, I                      |   | From-To: <b>2001 - 2013</b>                | ☐ Same as Debto   | or 1                                       | Same as Debtor 1 From-To:                             |
|          | tes and territor  No Yes. Ma                  | ies include Arizona, Ca                     | alifornia, Idaho, Louisiana, N             | egal equivalent in a commu<br>levada, New Mexico, Puerto I<br>Official Form 106H).            |  |   |
| Pa       | ert 2 Explai                                  | in the Sources of You                       | ur Income                                  |   |  |   |
| 4.       | Fill in the tota                              | al amount of income ye                      | ou received from all jobs and              | ing a business during this and all businesses, including paive together, list it only once to | rt-time activities.                        | calendar years?                                       |
|          | □ No  |   |  |   |  |   |
|          | Yes. Fil                                      | I in the details.                           |  |   |  |   |
|          |   |   | Debtor 1                                   |   | Debtor 2                                   |   |
|          |   |   | Sources of income<br>Check all that apply. | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |

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|          |                      |                            |                              | Debtor 1   |   | Debtor 2  |   |
|----------|----------------------|----------------------------|------------------------------|--|---|---|---|
|          |                      |                            |                              | Sources of income<br>Check all that apply.   | Gross income (before deductions and exclusions)         | Sources of income<br>Check all that apply.                      | Gross income<br>(before deductions<br>and exclusions) |
|          |                      | 1 of curre<br>iled for bar | nt year until<br>nkruptcy:   | ■ Wages, commissions, bonuses, tips  | \$3,756.20  | ☐ Wages, commissions, bonuses, tips                             |   |
|          |                      |                            |                              | ☐ Operating a business   |   | ☐ Operating a business  |   |
|          |                      |                            |                              | ☐ Wages, commissions, bonuses, tips  | \$400.00  | ☐ Wages, commissions, bonuses, tips                             |   |
|          |                      |                            |                              | Operating a business   |   | ☐ Operating a business  |   |
|          |                      | dar year:<br>December      | 31, 2015 )                   | ■ Wages, commissions, bonuses, tips  | \$21,812.00   | ☐ Wages,<br>commissions, bonuses,<br>tips                       |   |
|          |                      |                            |                              | ☐ Operating a business   |   | ☐ Operating a business  |   |
| □<br>■   | No<br>Yes.           | Fill in the de             | etails.                      | Debtor 1 Sources of income   | Gross income  | Debtor 2 Sources of income                                      | Gross income  |
|          |                      |                            |                              | Describe below   | (before deductions and exclusions)                      | Describe below.   | (before deductions and exclusions)                    |
|          |                      | dar year:<br>December      | 31, 2015 )                   | Unemployment   | \$6,447.00  |   | ,   |
| Part 3:  | list                 | Certain Pa                 | avments You                  | Made Before You Filed for  | Bankruntev  |   |   |
|          |                      |                            |                              |  |   |   |   |
| 6. Are □ | <b>either</b><br>No. | Neither De                 | ebtor 1 nor D                | s debts primarily consume<br>bebtor 2 has primarily cons<br>personal, family, or househo | umer debts. Consumer debt                               | s are defined in 11 U.S.C. § 1                                  | 01(8) as "incurred by ar                              |
|          |                      | During the                 | 90 days befo                 | re you filed for bankruptcy, d   | did you pay any creditor a tota                         | l of \$6,225* or more?  |   |
|          |                      | □ No.                      | Go to line 7                 |  |   |   |   |
|          |                      | Yes                        | paid that cre<br>not include | editor. Do not include payme payments to an attorney for                                 | nts for domestic support obliq<br>this bankruptcy case. | in one or more payments and gations, such as child support      | and alimony. Also, do                                 |
|          |                      | -                          | -                            |  |   | or after the date of adjustme                                   | n.  |
|          | Yes.                 |                            |                              | r both have primarily cons<br>re you filed for bankruptcy, c                             | umer debts.<br>did you pay any creditor a tota          | ol of \$600 or more?  |   |
|          |                      | ■ No.                      | Go to line 7                 |  |   |   |   |
|          |                      | ☐ Yes                      | List below e include pay     | each creditor to whom you pa   |   | d the total amount you paid th<br>port and alimony. Also, do no |   |

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Insider's Name and Address

Dates of payment

Total amount
paid

Amount you
still owe
Include creditor's name

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

Yes. List all payments to an insider

Include payments on debts guaranteed or cosigned by an insider.

- 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.
  - modifications, and contract disputes.

     No
  - Case title Nature of the case Court or agency Status of the case

    Case number
- 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.
  - NoYes. Fill in the information below.

Yes. Fill in the details.

Creditor Name and Address

Describe the Property

Date

Value of the property

Explain what happened

- 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?
  - No

No

Yes. Fill in the details.

Creditor Name and Address

Describe the action the creditor took

Date action was taken

Amount

- 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?
  - No
  - ☐ Yes

Debtor 1 Patricia N. Banks \_\_\_\_\_\_\_ Page 31 of 48 \_\_\_\_\_\_ Case number (if known) \_\_\_\_\_\_

| Pai | t 5: List Certain Gifts and Contributions   | <b>S</b> |   |                                   |                           |  |  |
|-----|---|----------|---|-----------------------------------|---------------------------|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600  Describe the gifts  Dates you gave |          |   |                                   |                           |  |  |
|     | per person  Person to Whom You Gave the Gift and Address:   |          | <b>.</b>  | the gifts                         |                           |  |  |
| 14. | Within 2 years before you filed for bankru  ■ No  |          | did you give any gifts or contributions with a tota   | al value of more than             | \$600 to any charity      |  |  |
|     | Yes. Fill in the details for each gift or co<br>Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code)  | otal     | Describe what you contributed   | Dates you contributed             | Value                     |  |  |
| Pai | t 6: List Certain Losses  |          |   |                                   |                           |  |  |
| 15. | Within 1 year before you filed for bankrup disaster, or gambling?  No Yes. Fill in the details.   | otcy or  | since you filed for bankruptcy, did you lose any  | thing because of the              | it, fire, other           |  |  |
|     | Describe the property you lost and how the loss occurred  | Include  | be any insurance coverage for the loss the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B: tty. | Date of your<br>loss              | Value of property<br>lost |  |  |
| Pai | t 7: List Certain Payments or Transfers   |          |   |                                   |                           |  |  |
| 16. | consulted about seeking bankruptcy or p   | reparii  | id you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services require    |                                   | rty to anyone you         |  |  |
|     | □ No  |          |   |                                   |                           |  |  |
|     | Yes. Fill in the details.   |          |   |                                   |                           |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Yo  | ou       | Description and value of any property transferred   | Date payment or transfer was made | Amount of<br>payment      |  |  |
|     | Ledford, Wu & Borges, LLC<br>105 W. Madison<br>23rd Floor<br>Chicago, IL 60602<br>notice@billbusters.com  |          | Attorney Fees   |                                   | \$130.00                  |  |  |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that   | itors o  |   | or transfer any prope             | rty to anyone who         |  |  |
|     | □ No  |          |   |                                   |                           |  |  |
|     | Yes. Fill in the details.  Person Who Was Paid  |          | Description and value of any property   | Data navment                      | Amount of                 |  |  |
|     | Address   |          | Description and value of any property transferred   | Date payment or transfer was made | payment                   |  |  |

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Debtor 1 Patricia N. Banks

|     | Person Who Was Paid<br>Address  | Description and v   | Description and value of any property transferred |               | Date payment or transfer was made                            | Amount of payment             |
|-----|---|---|---|---------------|--|-------------------------------|
|     | Ledford, Wu & Borges, LLC<br>105 W. Madison<br>23rd Floor<br>Chicago, IL 60602  | \$0.00 paid prior<br>\$ to<br>Chapter 13 plan                       | be paid throu                                     |               | 2015   | \$0.00                        |
|     | CIN Legal Data Services<br>4540 Honeywell Ct<br>Dayton, OH 45424  | \$50.00 for merg<br>reports, credit of<br>management co             | ounseling and                                     |               | 2015   | \$50.00                       |
|     | Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already  No | siness or financial affa<br>de as security (such as                 | airs?<br>the granting of a                        |               |  |                               |
|     | Yes. Fill in the details.   |   |   |               |  |                               |
|     | Person Who Received Transfer<br>Address<br>Person's relationship to you   | Description and v property transferr                                |   | paymen        | e any property or<br>ts received or debts<br>exchange        | Date transfer was made        |
| 10  | Within 10 years before you filed for bankrupto  | ov, did vou transfer on   | y proporty to a                                   | salf sattlad  | truct or cimilar davice                                      | of which you are a            |
| 19. | beneficiary? (These are often called asset-prote  |   | ly property to a                                  | sen-semeu     | trust or similar device                                      | or writerr you are a          |
|     | ■ No  |   |   |               |  |                               |
|     | Yes. Fill in the details.   |   |   |               |  |                               |
|     | Name of trust   | Description and v   | alue of the prop                                  | perty transfe | erred  | Date Transfer was made        |
| Par | List of Certain Financial Accounts, Inst  | ruments, Safe Deposit   | t Boxes, and Sto                                  | orage Units   |  |                               |
|     | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association.                             | other financial accou   | nts; certificates                                 | of deposit;   |  |                               |
|     | ■ No □ Yes. Fill in the details.  |   |   |               |  |                               |
|     | _   | Last 4 digits of  | Type of second                                    | unt or F      | Date account was   | Last balance                  |
|     |   | account number  | Type of accou<br>instrument                       | r             | cate account was<br>closed, sold,<br>noved, or<br>ransferred | before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables?  | ear before you filed for  | bankruptcy, an                                    | ny safe depo  | sit box or other depos                                       | itory for securities,         |
|     | ■ No  |   |   |               |  |                               |
|     | Yes. Fill in the details.   |   |   |               |  |                               |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  | Who else had acc<br>Address (Number, State and ZIP Code)            |   | Describe th   | e contents   | Do you still have it?         |
| 22. | Have you stored property in a storage unit or   | place other than your   | home within 1                                     | year before   | you filed for bankrupt                                       | су                            |
|     | No  |   |   |               |  |                               |
|     | Yes. Fill in the details.   |   |   |               |  | D                             |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or h<br>to it?<br>Address (Number, State and ZIP Code) |   | Describe th   | e contents   | Do you still have it?         |

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Case number (if known) Document

Debtor 1 Patricia N. Banks

| Pai | t 9: Identify Property You Hold or Control for  | Someone Else  |  |                       |  |  |  |  |  |
|-----|---|---|--|-----------------------|--|--|--|--|--|
| 23. | Do you hold or control any property that some for someone.  | one else owns? Include any prope  | rty you borrowed from, are storing fo  | r, or hold in trust   |  |  |  |  |  |
|     | ■ No  |   |  |                       |  |  |  |  |  |
|     | Yes. Fill in the details.   | Yes. Fill in the details.   |  |                       |  |  |  |  |  |
|     | Owner's Name  Address (Number, Street, City, State and ZIP Code)  Where is the property?  (Number, Street, City, State and ZIP Code)  Code)  Describe the property  Value of the property   |   |  |                       |  |  |  |  |  |
| Pai | t 10: Give Details About Environmental Inform   | nation  |  |                       |  |  |  |  |  |
| For | the purpose of Part 10, the following definitions   | s apply:  |  |                       |  |  |  |  |  |
|     | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. |   |  |                       |  |  |  |  |  |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposa   | • • • • • • • • • • • • • • • • • • •                                   | law, whether you now own, operate,     | or utilize it or used |  |  |  |  |  |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or   |   | s waste, hazardous substance, toxic    | substance,            |  |  |  |  |  |
| Rep | ort all notices, releases, and proceedings that y   | ou know about, regardless of whe  | n they occurred.                       |                       |  |  |  |  |  |
| 24. | Has any governmental unit notified you that yo  | u may be liable or potentially liable                                   | e under or in violation of an environm | nental law?           |  |  |  |  |  |
|     | ■ No  |   |  |                       |  |  |  |  |  |
|     | Yes. Fill in the details.   |   |  |                       |  |  |  |  |  |
|     | Name of site Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Governmental unit Address (Number, Street, City, State and ZIP Code)  Environmental law, if you Address (Number, Street, City, State and ZIP Code)   |   |  |                       |  |  |  |  |  |
| 25. | Have you notified any governmental unit of any  | y release of hazardous material?  |  |                       |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environmental law, if you know it      | Date of notice        |  |  |  |  |  |
| 26. | Have you been a party in any judicial or admini   | strative proceeding under any env                                       | ironmental law? Include settlements    | and orders.           |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |  |                       |  |  |  |  |  |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case                     | Status of the case    |  |  |  |  |  |
| Pai | t 11: Give Details About Your Business or Cor   | nnections to Any Rusiness   |  |                       |  |  |  |  |  |
| I G | Give Betails About 10th Business of Con   | meetions to Any Business  |  |                       |  |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy,   | did you own a business or have a  | ny of the following connections to an  | y business?           |  |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time   |   |  |                       |  |  |  |  |  |
|     | ☐ A member of a limited liability compar  | ny (LLC) or limited liability partners                                  | ship (LLP)                             |                       |  |  |  |  |  |
|     | ☐ A partner in a partnership  |   |  |                       |  |  |  |  |  |
|     | ☐ An officer, director, or managing exec  | utive of a corporation  |  |                       |  |  |  |  |  |

☐ An owner of at least 5% of the voting or equity securities of a corporation

Case 16-06904 Doc 1 Filed 02/29/16 Entered 02/29/16 16:58:36 Page 34 of 48 Case number (if known) Document Patricia N. Banks Debtor 1 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. п Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Patricia N. Banks Signature of Debtor 2 Patricia N. Banks Signature of Debtor 1 Date February 29, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - By agreement of the parties for prepetition and preconfirmation work, including consultation, drafting petition and plan, 341 meeting, negotiation with creditors, court hearings, amendments etc.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
  - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
  - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0.00

toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses,

leaving a balance due for the filing fee of \$0.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: <b>February 29, 2016</b>           |  |
|--|--|
| Signed:                                  |  |
| /s/ Patricia N. Banks                    | /s/ Kevin Rouse                            |
| Patricia N. Banks                        | Kevin Rouse 6284394                        |
|  | Attorney for the Debtor(s)                 |
| Debtor(s)                                |  |
| Do not sign this agreement if the amount | unts are blank.  Local Bankruptcy Form 23c |

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B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

| In 1 | re Patricia N. I   | Banks   |   |  | Case No   |   |             |
|------|--|---|---|--|---|---|-------------|
|      |  |   |   | Debtor(s)  | Chapter   | 13  |             |
|      | D  | ISCLOSURE (   | OF COMPENSA   | ATION OF ATTOR   | NEY FOR I   | DEBTOR(S)   |             |
| 1.   | compensation paid  | d to me within one ye   | ar before the filing of   | certify that I am the attorne<br>the petition in bankruptcy, o<br>in connection with the bank  | r agreed to be pa   | id to me, for services rend   | lered or to |
|      | For legal ser  | vices, I have agreed to   | accept  |  | \$  | 4,000.00  |             |
|      | Prior to the f   | iling of this statement   | I have received   |  | \$  | 0.00  |             |
|      | Balance Due  |   |   |  | . \$  | 4,000.00  |             |
| 2.   | \$ <u>310.00</u> of  | the filing fee has beer   | n paid.   |  |   |   |             |
| 3.   | The source of the  | compensation paid to  | me was:   |  |   |   |             |
|      |  | Debtor  |   | Other (specify):   |   |   |             |
| 4.   | The source of con  | npensation to be paid   | to me is:   |  |   |   |             |
|      |  | Debtor  |   | Other (specify):   |   |   |             |
| 6.   | A copy of the In return for the a a. Analysis of the b. Preparation an c. Representation d. [Other provisi- Exempt | agreement, together value debtor's financial site of filing of any petition of the debtor at the roots as needed] | with a list of the name have agreed to render uation, and rendering n, schedules, statemer neeting of creditors ar paration and filing of | ion with a person or persons s of the people sharing in the legal service for all aspects advice to the debtor in deter it of affairs and plan which rad confirmation hearing, and | e compensation is<br>of the bankruptcy<br>mining whether any be required;<br>any adjourned he | attached.  case, including: o file a petition in bankru earings thereof; cations as needed; pro | ptcy;       |
| 7.   |  |   |   | <b>2(f)(2)(A) for avoidance</b> s not include the following s  |   | isenoia goods.  |             |
|      |  |   | C   | ERTIFICATION   |   |   |             |
| this | I certify that the forbankruptcy procee  |   |   | eement or arrangement for p  | ayment to me for  | representation of the deb   | tor(s) in   |
| _    | February 29, 201   | 16  |   | /s/ Kevin Rouse  |   |   |             |
|      | Date   |   |   | Kevin Rouse 62843<br>Signature of Attorney<br>Ledford, Wu & Bor<br>105 W. Madison<br>23rd Floor<br>Chicago, IL 60602<br>312-853-0200 Fax<br>notice@billbusters<br>Name of law firm | ges, LLC<br>: 312-873-4693  |   |             |

## BILL BUSTERS 45 of 48

Ledford, Wu and Borges, LLC

Attorneys at Law = 1-0200 Fax: (312)873-4603

(312)853-0200 Fax: (312)873-4693

# FOR OFFICE USE (13) Client No. 668/2 Responsible attorney: 6//F/ CARA signed? (Y) N

#### ATTORNEY RETENTION CONTRACT

| 1 Parties In this contact (CCI) and   |
|---|
| 1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means Ledford, Wu & Borges, LLC an its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of inconsistency. In the |
| event of any inconsistency between this contract and a Court-Approved Retention Agreement, the latter shall prevail.  |
| 2. Services: Client retains Attorney for the following services:   Chapter 13 bankruptcy (debt adjustment)  |
| 5. Scope of Representation:   |
| (a) Attorney will counsel and represent Client in all aspects of the above matter(s) for the fee specified in Paragraph 4 EXCEPT: (1 adversary proceedings; (2) post-discharge litigation; (3) appeals; (4) other (specify):  |
| (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties.   |
| 4. Fees:  |
| Legal fee: \$\frac{\sqrt{000}}{\sqrt{000}} \text{PLUS \$310 filing fee (court cost) (an additional Court-Approved Retention Agreement may apply)}   |
| imerged credit report and credit counseling)  |
| TOTAL; \$ 400 less retainer received; \$ 300 Fee balance; \$ 3870 To be well but  |
| The legal fee is an \(\text{\alpha}\) advance payment retainer \(\text{\alpha}\) security retainer \(\text{\alpha}\) classic retainer and is a flat fee unless otherwise stated. Attach   |
| is unable to represent Chefit without receiving an advance navment refainer since a security retainer will be within the reach of our will  |
| oreditors. Should hourly billing be necessary. Anorney's billing rates are \$300-\$400/hour for partners. \$250/hour for page sister, and \$00.4  |
| for law clerks. The filing fee and expenses are subject to change at any time. The billing rates are subject to an annual review and potentia   |
| more as a cycly calcifulat year.  |
| The legal fee covers the initial consultation and all subsequent work. The case may be closed if the fees are not paid by the deadline  |
| Additional legal less may apply if the parties have entered into a Court-Approved Refertion Agreement and such Agreement as outhoring   |
| it the case is converted from one chapter to another. Additional court costs may apply for amending a netition, list, schedule or etetement neet  |
| thing of other reasons not due to Attorney's fault. NSF checks will be assessed a \$20 fee.   |
| Initial Consultation. Client acknowledges that Attorney has explained the following (please initial):   |
| ine options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2   |
| The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures  |
| Ine difference among various types of retainer and that Client has made the choice identified in Paragraph 4  |
| A Chapter 13 plan will be submitted to the Court in good faith. The plan payment may have to increase if creditor claims come in  |
| migner than scheduled, creditors successfully argue that they are entitled to a higher interest rate, the Trustee excessfully argue   |
| that the budgeted income is lower than actual income, the Trustee successfully argues that hudgeted expenses are unreasonably   |
| \ \\\_\_\\\_\\\\\\\\\\\\\\\\\\\\\\\\\\  |
| 11ME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected by otherwise  |
| universely diject Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested  |
| accuments and/or information, including but not limited to a certificate of credit counseling, are received by Attorney   |
| Other (specify);  |
| Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and nay change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed.                            |
| . Client's Duties. Client agrees, during the course of representation, to:  |
| a) provide Attorney with full, accurate and timely information, financial and otherwise   |
| b) follow Attorney's procedures and cooperate with Attorney in providing requested documents and information:   |
| c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty.   |
| u) miorin Autorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring   |
| any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or   |

(e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.

line of credit, or using an existing credit card or line of credit; and

- 7. Co-counsel. Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ outside counsel, at Attorney's expense, to work on this case, including: Kathleen W. Vaught, Kelly M. Johnson, David Carter, or Christina Banyon.
- 8. Termination. Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, and Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.

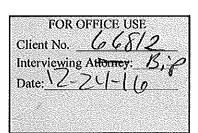
| X/             | Willia | Beiles | X | 12-2      | D     | ate:   | 12 / | 2 U | 1/1/ |  |
|----------------|--------|--------|---|-----------|-------|--------|------|-----|------|--|
| Attorney Signa | iture: | - 27m  |   | ARDC#_628 | 2439V | , u.o. | 14-  |     | vvy  |  |

### BILLBUSTERS

Ledford, Wu and Borges, LLC

105 W. Madison, 23<sup>rd</sup> Floor, Chicago, IL 60602 (312)853-0200 Fax: (312)873-4693

#### **CONSULTATION AGREEMENT**



#### THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

- 1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford, Wu & Borges, LLC and its staff attorneys.
- 2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
- 3. Client's Duties: In order for Attorney to give meaningful advice, Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
- 4. Services: The attorney agrees to provide Client with the following services:
  - a. analyzing Client's financial circumstances based on information provided by Client;
  - b. to the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
  - c. if Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's
    options, informing Client what additional information Client needs to provide in order to enable Attorney to
    provide such advice and information;
  - d. where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
  - e. to the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client

| 5. Fees (c                | check one):  |
|---------------------------|--|
|                           | consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-client lationship shall terminate at the conclusion of the interview  |
| C1                        | lient agrees to pay \$ in nonrefundable consultation fee   |
| the case, a<br>Client and | nt Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation ies' obligations and a breakdown of the costs. |
| Client is the             | wledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to he date noted above, and that Attorney provided Client with a copy of this agreement and the disclosure and on mandated by Section 527(b) of the Bankruptcy Code.  |
| X_x                       | Patricio Mariles x   |
| Attorney S                | Signature: 24 2 10 10 10 10 10 10 10 10 10 10 10 10 10   |

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#### United States Bankruptcy Court Northern District of Illinois

| In re | Patricia N. Banks   |   | Case No.   |    |  |  |  |
|-------|---|---|------------|----|--|--|--|
|       |   | Debtor(s)   | Chapter    | 13 |  |  |  |
|       | VEI   | VERIFICATION OF CREDITOR MATRIX                             |            |    |  |  |  |
|       |   | Number of C   | Creditors: | 6  |  |  |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |   |            |    |  |  |  |
| Date: | February 29, 2016   | /s/ Patricia N. Banks Patricia N. Banks Signature of Debtor |            |    |  |  |  |

American Credit Accept 5486 Old Dixie Highway Forest Park, GA 30297

Arnold Scott Harris, P.C. 111 W. Jackson Blvd Ste 600 Chicago, IL 60604

City of Chicago - Dep't of Revenue PO Box 88292 Chicago, IL 60680

Comcast One Comcast Center Philadelphia, PA 19103

Dept Of Ed/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Secretary of State Safety & Financial 2701 S. Dirksen Parkway Springfield, IL 62723